Case 24-13634-SDM Doc 6 Filed 11/21/24 Entered 11/21/24 10:23:09 Desc Main Document Page 1 of 37

Fill in this info	ormation to identify your	case:		
Debtor 1	Kanica Chantey Lo	e Mair Hudson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI	
Case number	24-13634			
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	t1: Summarize Your Assets		
			r assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$_	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	2,373.32
	1c. Copy line 63, Total of all property on Schedule A/B	\$_	2,373.3
Par	t 2: Summarize Your Liabilities		
			r liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	319.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$_	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	33,604.0
	Your total liabilities	\$	33,923.00
Par	t3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$_	4,273.6
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$_	4,137.7
Par	4: Answer These Questions for Administrative and Statistical Records		
3.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other:	schedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persor	nal, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Debtor 1 Kanica Chantey Le Mair Hudson

Case number (if known) 24-13634

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,832.38

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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		Documen	il raye o oi oi		
Fill in this inform	nation to identify your	case and this filing:			
Debtor 1	Kanica Chantey L	e Mair Hudson			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT O	F MISSISSIPPI		
Office Otates Bar	intupley Court for the.	- TORTHERW BIOTHIOT OF			
Case number _2	24-13634				
					amended filing
O#: -: -	100 A /D				
	rm 106A/B				
Schedule	e A/B: Prop	erty			12/15
think it fits best. Be information. If more Answer every quest	e as complete and accura e space is needed, attach tion.	ate as possible. If two married a separate sheet to this form.	ce. If an asset fits in more than one category people are filing together, both are equally re. On the top of any additional pages, write you fou Own or Have an Interest In	sponsible for supply	ying correct
1. Do you own or h	ave any legal or equitabl	e interest in any residence, bu	ilding, land, or similar property?		
No. Go to Part	2.				
☐ Yes. Where is	the property?				
Part 2: Describe	Your Vehicles				
			cles, whether they are registered or not		les you own that
3. Cars, vans, tru	ıcks, tractors, sport u	tility vehicles, motorcycles	;		
_					
■ No					
☐ Yes					
Examples: Boat			I vehicles, other vehicles, and accessorels, snowmobiles, motorcycle accessories	ies	
■ No □ Yes					
L 103					
		-	ries from Part 2, including any entries fo		\$0.00
Part 3: Describe	Your Personal and Hous	ahold Itams			
		able interest in any of the	following items?	port	rent value of the tion you own?
O Hawashald	ada and from table				ms or exemptions.
 Household go Examples: Maj ☐ No 	ods and furnishings jor appliances, furniture	, linens, china, kitchenware			
Yes. Descr	ibe				
	**EVENAD	F. Living Boom Furniture	(\$200.00) Rodroom Euroituro	1	
	(\$400.00),		(\$200.00), Bedroom Furniture \$100.00), Washer & Dryer		\$1,035.00

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Debtor 1

Kanica Chantey Le Mair Hudson

7.	Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games						
	□ No ■ Yes. Describe						
	**EXEMPT: 65" Television (\$300.00)						
	**Personal Property - Value < \$200.00 [Exempt]: 55" Television (\$175.00) & 42" Television (\$125.00).	\$600.00					
8.	 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, other collections, memorabilia, collectibles No 	or baseball card collections;					
	☐ Yes. Describe						
9.	 Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a musical instruments No 	and kayaks; carpentry tools;					
10	 ☐ Yes. Describe 0. Firearms						
	■ No □ Yes. Describe						
11	 1. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe 						
	**EXEMPT: Clothing (\$400.00)	\$400.00					
_	EXEMIF 1. Clottilling (\$400.00)	Ψ+00.00					
12	 2. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g □ No ■ Yes. Describe 	old, silver					
	**EXEMPT: Miscellaneous Jewelry (\$175.00)	\$175.00					
	 3. Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe 4. Any other personal and household items you did not already list, including any health aids you did not list No 						
	☐ Yes. Give specific information						
1	15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$2,210.00					
	Part 4: Describe Your Financial Assets						
D	Do you own or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured					

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

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D	Debtor 1 Kanica Chantey Le Mair Hudson			Case number (if known) 24-13634	
16.		have in y	our wallet, in your home,	in a safe deposit box, and on hand when you file your petition	
	■ No □ Yes				
17.	institutions			s; certificates of deposit; shares in credit unions, brokerage houses, and othen the same institution, list each.	er similar
	□ No ■ Yes			Institution name:	
		17.1.	Checking Account	Chime Bank	\$78.00
		17.2.	Savings Account	Chime Bank	\$60.32
		17.3.	Debit Account	Chime Bank	\$0.00
		17.4.	Checking Account	Brightview Credit Union [New Account]	\$25.00
19.	Non-publicly traded s joint venture No □ Yes. Give specific in	formation		ed and unincorporated businesses, including an interest in an LLC, par % of ownership:	tnership, and
20.	. Government and corp Negotiable instrument	Na p orate bo s include	me of entity: nds and other negotiab personal checks, cashier	% of ownership: le and non-negotiable instruments s' checks, promissory notes, and money orders. er to someone by signing or delivering them.	
	☐ Yes. Give specific inf		about them uer name:		
21.	□ No	IRA, ERI	SA, Keogh, 401(k), 403(b	o), thrift savings accounts, or other pension or profit-sharing plans	
	Yes. List each accou		tely. of account:	Institution name:	
		401(l	k)	Fidelity Investments	Unknown
22.	Examples: Agreement	ed deposi	ts you have made so that	t you may continue service or use from a company ic utilities (electric, gas, water), telecommunications companies, or others	
	■ No □ Yes			Institution name or individual:	
23.	Annuities (A contract f	or a perio	dic payment of money to	you, either for life or for a number of years)	
		ssuer nam	ne and description.		

Official Form 106A/B Schedule A/B: Property page 3

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Case 24-13634-SDM Doc 6 Filed 11/21/24 Entered 11/21/24 10:23:09 Desc Main Document Page 6 of 37 Debtor 1 Case number (if known) 24-13634 Kanica Chantey Le Mair Hudson ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit $\hfill \square$ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Earned Income Tax Not to Exceed \$5,000.00 [Per Year] Credit Unknown Federal Income Tax Not to Exceed \$5,000.00 [Per Year] Unknown Refund State Income Tax Not to Exceed \$5,000.00 [Per Year] Unknown Refund 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☐ Yes, Name the insurance company of each policy and list its value

Yes. Name the insurance company of each policy and list its value.

Company name: Beneficiary:

Surrender or refund

value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

■ No

☐ Yes. Give specific information..

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1

Case number (if known) 24-13634

Kanica Chantey Le Mair Hudson 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$163.32 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6 ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,210.00 58. Part 4: Total financial assets, line 36 \$163.32 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$2,373.32 Copy personal property total \$2,373.32 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$2,373.32

Official Form 106A/B Schedule A/B: Property page 5 Case 24-13634-SDM Doc 6 Filed 11/21/24 Entered 11/21/24 10:23:09 Desc Main Document Page 8 of 37

Fill in this information to identify your case:							
Debtor 1	Kanica Chantey Le						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI				
Case number	24-13634						
(if known)					Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions	are you claimin	g? Check one only	, even if your s	spouse is filing	with	you
	Trinon set of exemptions	are you olulling	g. Chook one only	, over in your	spoude is illing	, ,,	,,,,

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the portion you own		ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
**EXEMPT: Living Room Furniture (\$200.00), Bedroom Furniture	\$1,035.00	•	\$1,035.00	Miss. Code Ann. § 85-3-1(a)	
(\$400.00), Dining Room Furniture (\$100.00), Washer & Dryer (\$300.00), & Microwave (\$35.00). Line from <i>Schedule A/B</i> : 6.1		Ш	100% of fair market value, up to any applicable statutory limit		
**EXEMPT: 65" Television (\$300.00)	\$600.00		\$600.00	Miss. Code Ann. § 85-3-1(a)	
**Personal Property - Value < \$200.00 [Exempt]: 55" Television (\$175.00) & 42" Television (\$125.00). Line from <i>Schedule A/B</i> : 7.1			100% of fair market value, up to any applicable statutory limit		
**EXEMPT: Clothing (\$400.00)	\$400.00		\$400.00	Miss. Code Ann. § 85-3-1(a)	
Line nom <i>Genedale Adb.</i> 11.1			100% of fair market value, up to any applicable statutory limit		
**EXEMPT: Miscellaneous Jewelry (\$175.00)	\$175.00		\$175.00	Miss. Code Ann. § 85-3-1(a)	
Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit		

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De	ebtor 1 Kanica Chantey Le Mair Hudson		Case number (if known) 24-13634				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	· · · · · · · · · · · · · · · · · · ·		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.			
	401(k): Fidelity Investments Line from Schedule A/B: 21.1	Unknown		Unknown	Miss. Code Ann. § 85-3-1(e)		
	Elle Holli Genedale PAB. 21.1			100% of fair market value, up to any applicable statutory limit			
	Earned Income Tax Credit: Not to Exceed \$5,000.00 [Per Year]	Unknown		Unknown	Miss. Code Ann. § 85-3-1(i)		
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit			
	Federal Income Tax Refund: Not to Exceed \$5,000.00 [Per Year]	Unknown		Unknown	Miss. Code Ann. § 85-3-1(j)		
	Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit			
	State Income Tax Refund: Not to Exceed \$5,000.00 [Per Year]	Unknown		Unknown	Miss. Code Ann. § 85-3-1(k)		
	Line from Schedule A/B: 28.3			100% of fair market value, up to any applicable statutory limit			
3.	Are you claiming a homestead exemption of more than \$189,050? (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.) No						
	Yes. Did you acquire the property covered No	,215 days before you filed this case?					
	□ Yes						

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Fill in this information to identify your case:						
Debtor 1	Kanica Chantey Le	Mair Hudson				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF MISSISSIPPI			
Case number	24-13634					
(if known)					☐ Check if this is an	
					amended filing	
•					_	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - □ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part 1:	I ict Al	I Secured	Claims

Column B Column C Column A 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As Amount of claim Value of collateral Unsecured much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this portion value of collateral. If any claim 2.1 | Fidelity Investments Describe the property that secures the claim: \$319.00 \$0.00 \$319.00 Creditor's Name Continue Payroll Deduction at \$10.52 Weekly [Monthly: \$45.58]. [Estimated Payoff Date: June 2025] As of the date you file, the claim is: Check all that P.O. Box 770001 Cincinnati, OH 45277 ☐ Contingent Number, Street, City, State & Zip Code Unliquidated ☐ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured) Debtor 1 only car loan) Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit ☐ Check if this claim relates to a 401(k) Retirement Loan Other (including a right to offset) community debt Date debt was incurred 6/2023 Last 4 digits of account number Unknown

Add the dollar value of your entries in Column A on this page. Write that number here:

\$319.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$319.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Docume	ent Page 1.	L 01 37	
Fill in this in	nformation to identify your o	ase:			
Debtor 1	Kanica Chantey Le	Mair Hudson			
20210	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRIC	T OF MISSISSIPPI		
0					
Case number	er <u>24-13634</u>				☐ Check if this is an
(amended filing
Official F	orm 106E/F				
Schedul	le E/F: Creditors W	ho Have Unsec	ured Claims		12/15
any executory Schedule G: E Schedule D: C left. Attach the name and cas	or contracts or unexpired leases Executory Contracts and Unexpi Creditors Who Have Claims Secu e Continuation Page to this page en number (if known).	that could result in a clain red Leases (Official Form ired by Property. If more s e. If you have no informati	n. Also list executory of 106G). Do not include space is needed, copy to	ontracts on Schedule A/B: Prop any creditors with partially secu the Part you need, fill it out, nun	IORITY claims. List the other party to perty (Official Form 106A/B) and on ured claims that are listed in nber the entries in the boxes on the of any additional pages, write your
	ist All of Your PRIORITY Un				
_	reditors have priority unsecured	ciaims against you?			
_	o to Part 2.				
☐ Yes.					
Part 2: L	ist All of Your NONPRIORIT	Y Unsecured Claims			
3. Do any c	reditors have nonpriority unsec	ured claims against you?			
□ No. Yo	ou have nothing to report in this pa	ort. Submit this form to the o	ourt with your other sche	edules	
_	ou have hearing to report in the pe		our war your ouror our	auto.	
Yes.					
unsecure		for each claim. For each claim	aim listed, identify what t	ype of claim it is. Do not list claims	has more than one nonpriority s already included in Part 1. If more has fill out the Continuation Page of
					Total claim
4.1 Allia	ance Collection Svc. Inc (re	g.) Last 4 digi	ts of account number	Unknown	Unknown
	priority Creditor's Name				
	Jeff Chambers, as agent 'E Franklin Street	When was	the debt incurred?	Unknown	
_	pelo, MS 38804				
	ber Street City State Zip Code	As of the d	ate you file, the claim i	s: Check all that apply	
Who	incurred the debt? Check one.				
	Debtor 1 only	☐ Conting	ent		
	Debtor 2 only	■ Unliquid	ated		
	Debtor 1 and Debtor 2 only	☐ Dispute	d		
	At least one of the debtors and ano		NPRIORITY unsecured	l claim:	
	Check if this claim is for a comn	•			
debt	t e claim subject to offset?			ration agreement or divorce that y	ou did not
_	-		iority claims	g plans, and other similar debts	
				y pians, and other similar debts	
ΠY	'es	Other. S	Specify Collections		

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Debto	Kanica Chantey Le Mair Hudson		Case number (if known) 24-13634	
4.2	Allstate Insurance Company	Last 4 digits of account number	2585	\$133.00
	Nonpriority Creditor's Name P.O. Box 660598 Dallas, TX 75266	When was the debt incurred?	5/2/2023	=
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	■ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Deficiency E Policy	Balance on Lapsed Insurance	-
4.3	America's Car Mart, Inc. (p)	Last 4 digits of account number	0500	\$4,078.00
	Nonpriority Creditor's Name 1805 N 2nd Street	When was the debt incurred?	4/14/2020	
	Suite 401		1/1 1/2020	-
	Rogers, AR 72756			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	■ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Vehicle	Balance on Voluntarily Surrendered	-
4.4	Capital One Bank (p) Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	\$760.00
	P.O. Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	Unknown	-
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other Specify Purchases		
				

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Debtor	1 Kanica Chantey Le Mair Hudson	Case number (if known) 24-13634	
4.5	Chesteen Properties (reg.) Nonpriority Creditor's Name	Last 4 digits of account number Unknown	Unknown
	c/o George V. Chesteen, as agent 5 Talley Ho Drive	When was the debt incurred? Unknown	_
	Starkville, MS 39759 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	□ Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	t
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Deficiency Balance Owed on Broken Lease	_
4.6	Cleo Al INC,	Last 4 digits of account number 6239	Unknown
	Nonpriority Creditor's Name 150 West 25th Street RM 403	When was the debt incurred? 6/8/2024	_
	New York, NY 10001 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.7	Credit Acceptance Corp. (p)	Last 4 digits of account number COCI	\$7,600.00
	Nonpriority Creditor's Name 25505 W. 12 Mile Road, Suite 3000 Southfield, MI 48034	When was the debt incurred? 2018	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	$\hfill\square$ Obligations arising out of a separation agreement or divorce that you did no report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
		Judgment Enrolled in the Circuit Court of Leflore County [Deficiency Balance Owed on Repossessed	
	Yes	Other. Specify Chevrolet Trailblazer]	

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Debio	Kanica Chantey Le Mair Hudson	Case number (# known)	
4.8	Credit One Bank	Last 4 digits of account number XXXX	\$830.00
	Nonpriority Creditor's Name		
	P.O. Box 98873 Las Vegas, NV 89193	When was the debt incurred? 6/16/2022	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	. Co. and and you me, and cannot choose an area appropriate	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes	■ Other. Specify Purchases on Credit Card	
	iii Yes	Other. Specify Furchases on Credit Card	
4.9	Creditor's Bankruptcy Service (p)	Last 4 digits of account number Unknown	Unknown
	Nonpriority Creditor's Name		
	P.O.Box 800849	When was the debt incurred? Unknown	
	Dallas, TX 75380 Number Street City State Zip Code	- As of the date year file the plain in Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.1	Franklin Collection Service (reg.		
4.1	agent)	Last 4 digits of account number Unknown	Unknown
	Nonpriority Creditor's Name		_
	c/o Dan Franklin, as agent P.O. Box 3910	When was the debt incurred? Unknown	
	Tupelo, MS 38803-3910		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other, Specify Collections	
	□ 169	Timer Specify Collections	

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Kanica Chantey Le Mair Hudson		Case number (if known) 24-13634	
Franklin Telephone Company, Inc. (p)	Last 4 digits of account number	2313	\$142.00
Nonpriority Creditor's Name 1094 Monroe Road, SE Bude, MS 39630	When was the debt incurred?	3/4/2022	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Phone/Cellu	ular Service	
Global Lending Services (p)	Last 4 digits of account number	0034	\$14,121.00
Nonpriority Creditor's Name 1200 Brookfield Boulevard	When was the debt incurred?	8/5/2021	
Suite 300			
Greenville, SC 29607-6583 Number Street City State Zip Code	As of the date you file, the claim	ic. Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	is. Oneck all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	Surrendere		
□ Yes	■ Other. Specify [Charged O	<u>#]</u>	
Intercoastal Financial, LLC Nonpriority Creditor's Name	Last 4 digits of account number	Unknown	Unknown
7954 Transit Road #144 Buffalo, NY 14221	When was the debt incurred?	Unknown	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	og plans, and other similar dobts	
■ No		ig pians, and other similar debts	
☐ Yes	Other Specify Collections		

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Debi	for 1 Kanica Chantey Le Mair Hudson	Case number (if known)24-13634	
4.1 4	Jefferson Capital Systems (p)	Last 4 digits of account number Unknown	Unknown
	Nonpriority Creditor's Name P.O. Box 7999	When was the debt incurred? Unknown	_
	Saint Cloud, MN 56302-7999 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	7.6 of the date you me, the stant lot officer all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Collections	_
4.1			
5	Merchant Adjustment Service (p) Nonpriority Creditor's Name	Last 4 digits of account number Unknown	Unknown
	P.O. Box 7511 Mobile, AL 36670	When was the debt incurred? Unknown	_
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	■ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	_
4.1 6	Midland Credit Management	Last 4 digits of account number 2526	\$553.00
0	Nonpriority Creditor's Name		
	P.O. Box 772719	When was the debt incurred? 12/21/2023	_
	Memphis, TN 38177 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	ne or the table you me, the claim to check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Collections	
		· · ·	_

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Case number (if known) Debtor 1 Kanica Chantey Le Mair Hudson 24-13634 4.1 Midland Funding, LLC (reg. agent) Unknown Unknown Last 4 digits of account number Nonpriority Creditor's Name c/o Midland Credit Management, as When was the debt incurred? Unknown agent P.O. Box 2011 Warren, MI 48090 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Collections Other, Specify 4.1 MSCB, Inc. (reg.) Last 4 digits of account number Unknown Unknown 8 Nonpriority Creditor's Name c/o David W. Edwards PC, as agent When was the debt incurred? Unknown P.O. Box 458 Paris, TN 38242 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.1 OCH Regional Medical Center (p) 3945 \$1,992.00 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Drawer 1506 When was the debt incurred? 4/7/2023 Starkville, MS 39760-1506 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No Medical services rendered to petitioner and/or ☐ Yes Other. Specify family member

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Case number (if known) Debtor 1 Kanica Chantey Le Mair Hudson 4.2 Pendrick Capital Partners II, LLC (p) Unknown Unknown Last 4 digits of account number 0 Nonpriority Creditor's Name c/o Peritus Portfolio Services II, LLC. When was the debt incurred? Unknown P.O. Box 141419 Irving, TX 75014-1419 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only Unliquidated ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collections 4.2 Plaza Services (reg agent) Unknown Unknown Last 4 digits of account number Nonpriority Creditor's Name c/o Incorp Services, Inc When was the debt incurred? Unknown 302 Enterprise Drive, Suite A Oxford, MS 38655 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.2 Portfolio Recovery Assoc. (reg.) Unknown Unknown Last 4 digits of account number Nonpriority Creditor's Name c/o Corporation Service Co., as agent When was the debt incurred? Unknown 109 Executive Drive Suite 3 Madison, MS 39110 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Collections

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Case number (if known) Debtor 1 Kanica Chantey Le Mair Hudson 24-13634 4.2 Quantum3 Group LLC (p) Unknown Unknown Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 788 When was the debt incurred? Unknown Kirkland, WA 98083-0788 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collections ☐ Yes 4.2 Resurgent Capital Serv. (reg.) Unknown Last 4 digits of account number Unknown Nonpriority Creditor's Name c/o Corporation Service Co., as agent When was the debt incurred? Unknown 109 Executive Drive Suite 3 Madison, MS 39110 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collections ☐ Yes 4.2 The Oaks Apartments (reg.) 2231 \$2,832.00 Last 4 digits of account number Nonpriority Creditor's Name c/o Richard L. James, as agent When was the debt incurred? 12/5/2018 P.O. Box 562 Waynesboro, MS 39367 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No \square Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Deficiency Balance Owed on Broken Lease ☐ Yes

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Debtor	1 Kanica Chantey Le Mair Hudson		Case number (if known)	24-13634			
4.2	Victoria's Secret/Comenity Bank (p)	Last 4 digits of account number	xxxx	_	\$563.00		
	Nonpriority Creditor's Name c/o Quantum 3 Group, LLC P.O. Box 788	When was the debt incurred?	11/18/2022				
	Kirkland, WA 98083 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	_	☐ Contingent					
	■ Debtor 1 only	■ Unliquidated					
	Debtor 2 only						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	ed claim:				
	At least one of the debtors and another	☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sep report as priority claims	aration agreement or divorce	that you did not			
	■ No	☐ Debts to pension or profit-shari	ng plans, and other similar de	bts			
	Yes		on Credit Card				
4.2	Wakefield & Associates	Last 4 digits of account number	Unknown		Unknown		
	Nonpriority Creditor's Name PO Box 50250 Knoxville, TN 37950	When was the debt incurred?	Unknown				
Number Street City State Zip Code Who incurred the debt? Check one.		As of the date you file, the claim					
	■ Debtor 1 only						
	Debtor 2 only	☐ Contingent ■ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt	\square Obligations arising out of a sep	aration agreement or divorce	that you did not			
	Is the claim subject to offset?	report as priority claims					
	No	☐ Debts to pension or profit-shari	ng plans, and other similar de	bts			
	Yes	Other. Specify Collections	Other. Specify Collections				
Part 3:	List Others to Be Notified About a D	obt That You Alroady Listed					
5. Use th is tryir have r	is page only if you have others to be notified ag to collect from you for a debt you owe to shore than one creditor for any of the debts the dor any debts in Parts 1 or 2, do not fill out	I about your bankruptcy, for a debt that someone else, list the original creditor in nat you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the c	collection agency h	nere. Similarly, if you		
	nd Address	On which entry in Part 1 or Part 2 did you	_				
c/o Co	ea's Car-Mart (reg.) rporation Service Co., as agent recutive Drive		Part 1: Creditors with Priori Part 2: Creditors with Nonp	•			
Madiso	on, MS 39110	Last 4 digits of account number					
	nd Address	On which entry in Part 1 or Part 2 did you	_				
	l One Bank (USA) N.A. (p) rtfolio Recovery Associates, LLC		Part 1: Creditors with Priori	•			
P.O. Box 41067 Norfolk, VA 23541		•	Part 2: Creditors with Nonp	riority Unsecured C	aims		
NOTIOR	A, VA 20041	Last 4 digits of account number					
	nd Address	On which entry in Part 1 or Part 2 did you	u list the original creditor?				
•	One National Association		Part 1: Creditors with Priori	•			
	rporation Service Co., as agent recutive Drive	•	Part 2: Creditors with Nonp	riority Unsecured Cl	laims		

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Case number (if known) Debtor 1 Kanica Chantey Le Mair Hudson 24-13634 Madison, MS 39110 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Comenity Capital Bank (p) Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Weinstein & Rilev. PS ■ Part 2: Creditors with Nonpriority Unsecured Claims 2001 Western Avenue, Suite 400 Seattle, WA 98121 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credit Acceptance Corp. (reg.) Line 4.7 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Corporation Service Co., as agent ■ Part 2: Creditors with Nonpriority Unsecured Claims 109 Executive Drive Suite 3 Madison, MS 39110 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credit Collection Service Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 607 Part 2: Creditors with Nonpriority Unsecured Claims Norwood, MA 02062 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Credit One Bank/LVNV Funding (p) Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Resurgent Capital Services ■ Part 2: Creditors with Nonpriority Unsecured Claims P.O. Box 10587 Greenville, SC 29603-0587 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Franklin Service Inc. Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 120 Corporate Blvd. Suite 100 Part 2: Creditors with Nonpriority Unsecured Claims Norfolk, VA 23502 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Franklin Telephone Company, Inc. Line 4.11 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims (reg.) ■ Part 2: Creditors with Nonpriority Unsecured Claims c/o Lane B. Reed, as agent 26 South First Street Meadville, MS 39653 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Global Lending Services, LLC (reg.) Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Cogency Global, Inc., as agent Part 2: Creditors with Nonpriority Unsecured Claims 248 East Capitol Street Suite 840 Jackson, MS 39201 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Jefferson Capital Systems Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims c/o Corporation Service Co., as agent ■ Part 2: Creditors with Nonpriority Unsecured Claims 109 Executive Drive Suite 3 Madison, MS 39110 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address LVNV Funding, LLC Line 4.8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 1269 Part 2: Creditors with Nonpriority Unsecured Claims Greenville, SC 29602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Credit Management Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

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Debtor 1 Kanica Chantey Le Mair Hudson		Case number (if known) 24-13634			
P.O. Box 772719 Memphis, TN 38177	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?			
OCH Professional Services	Line 4.19 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
P.O. Box 1326		Part 2: Creditors with Nonpriority Unsecured Claims			
Starkville, MS 39760	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?			
Procollect, Inc.	Line 4.25 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
P.O. Box 550369 Dallas, TX 75355		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Dallas, 17 75555	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?			
Resurgent Capital Services (p)	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
P.O. Box 1269		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Greenville, SC 29602	Last 4 digits of account number				
Name and Address	On which entry in Part 1 or Part 2 di	id you list the original creditor?			
TeleRecovery	Line 4.11 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims			
P.O. Box 641090 Kopper J.A. 70064, 1000		■ Part 2: Creditors with Nonpriority Unsecured Claims			
Kenner, LA 70064-1090	Last 4 digits of account number				

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 33,604.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 33,604.00

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Fill in this information to identify your case:				
Debtor 1	Kanica Chantey Le	e Mair Hudson		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI	
Case number	24-13634			
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Roger Price 29 Waverly Road West Point, MS 39773	Residential Lease: Assume Monthly: \$565.00 [Lease Expiry: 10/2025]

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		Doddine	nt rage 2+0	1 0 1	
Fill in this	information to identify your	case:			
Debtor 1	Kanica Chantey Le	e Mair Hudson			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
				-	
Case num (if known)	ber <u>24-13634</u>				☐ Check if this is an
,					amended filing
~ ((; - ; -	I = 400I I				
	I Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
■ No □ Yes 2. With Arizor		ı lived in a community p ı Nevada, New Mexico, Pu	r operty state or territor lerto Rico, Texas, Wash	y? (Community propert	
in line Form out C	e 2 again as a codebtor only i	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed to 6G). Use Schedule D,	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt es that apply:
0.4				По	
3.1	Name			_ ☐ Schedule D, lin☐ Schedule E/F,	
				☐ Schedule G, lin	
-	Number Street			_	
	City	State	ZIP Code		
				Пол	
3.2	Name			_ ☐ Schedule D, lin☐ Schedule E/F,	
				☐ Schedule E/F,	
	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

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Sill	in this information to identify your c	200:						
	, , , , , , , , , , , , , , , , , , ,	tey Le Mair Hudson						
	otor 2	,			_			
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF MISSISSIPPI		_			
	24-13634 (a)						nt showing postpe	
0	fficial Form 106l				_	MM / DD/ Y	s of the following	date:
	chedule I: Your Inc	ome			'	VIIVI / DD/ Y	111	12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. T1: Describe Employment	are married and not filir r spouse is not filing wi	ng jointly, and your s th you, do not includ	spouse i	s living with nation abou	n you, inclu It your spo	ide information a use. If more spac	bout your e is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-filing spo	ouse
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed			☐ Emplo	yed	
		Employment status	☐ Not employed			☐ Not er	nployed	
	employers.	Occupation	Assistant Superv	isor				
	Include part-time, seasonal, or self-employed work.	Employer's name	Raybern Foods, LLC.					
	Occupation may include student or homemaker, if it applies.	Employer's address	3170 Crow Canyo Suite 200 San Ramon, CA		e 			
		How long employed th	nere? 5 Years					
Par	t 2: Give Details About Mon	nthly Income						
	mate monthly income as of the duse unless you are separated.	ate you file this form. If y	ou have nothing to re	port for a	any line, writ	e \$0 in the	space. Include yo	ur non-filing
•	u or your non-filing spouse have mo e space, attach a separate sheet to		mbine the information	n for all e	mployers for	that persor	n on the lines belo	w. If you need
					For De	ebtor 1	For Debtor 2 o	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	5,406.32	\$	N/A_
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$5,4	06.32	\$N/	<u>A</u>

Official Form 106I Schedule I: Your Income page 1

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Deb	tor 1	Kanica Chantey Le Mair Hudson	-	C	Case number (if kno	own)	24-13	3634		
					For Debtor 1		non	Debtor 2 or -filing spou	se	
	Cop	by line 4 here	4.		\$5,406	.32	\$		1/A	
5.	List	t all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a		\$ 734	51	\$	N	N/A	
	5b.	Mandatory contributions for retirement plans	5b			.00	\$_		√/A	
	5c.	Voluntary contributions for retirement plans	5c		\$ 162		\$		1/A	
	5d.	Required repayments of retirement fund loans	5d		\$ 42	.08	\$	١	N/A	
	5e.	Insurance	5e		\$ 193		\$	١	N/A	
	5f.	Domestic support obligations	5f.			.00	\$		N/A	
	5g.	Union dues	5g			.00	—		<u>\/A</u>	
	5h.	Other deductions. Specify:	_ 5h				+ \$		<u> </u>	
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$1,132		\$		<u>\/A</u>	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ 4,273	.62	\$		N/A	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$ 0	.00	\$		N/A	
	8b.	Interest and dividends	8b		·	.00	\$_		<u>√A</u> √A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce					_	<u> </u>	4// C	
		settlement, and property settlement.	8c		\$ 0	.00	\$	1	N/A	
	8d.		8d			.00	\$	١	N/A	
	8e.	Social Security	8e		\$ 0	.00	\$	١	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$ 0	.00	\$		N/A	
	8g.	Pension or retirement income	 8g			.00	\$		√/A	
	8h.	Other monthly income. Specify:	8h	.+		.00	+ \$	١	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	60	.00	\$		N/A	
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	4,273.62	+ \$		N/A = \$	4 27	73.62
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-	4,270.02	. * -		14//		0.02
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not excify:	depe					Schedule J. 11. +\$		0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certaillies						12. \$_	4,27	73.62
13.	Do	you expect an increase or decrease within the year after you file this form	?					moi	nthly inco	ome
. 0.		No.	-							
	П	Yes, Explain:								

Official Form 106l Schedule I: Your Income page 2

						Ī			
Fill	in this informa	tion to identify yo	our case:						
Deb	otor 1	Kanica Chan	tey Le Ma	ir Hudson		Ch	eck if thi	s is: nended filing	
Deb	tor 2							ū	wing postpetition chapter
(Spo	ouse, if filing)					_	13 exp	enses as of	the following date:
Unit	ed States Bankı	ruptcy Court for the	: NORTH	ERN DISTRICT OF MISS	ISSIPPI		MM / I	DD / YYYY	
	e number 24 nown)	4-13634							
Of	fficial Fo	rm 106J				•			
S	chedule	J: Your	 Exper	ISAS					12/1
Be info nur	as complete ormation. If m mber (if know	and accurate as lore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people ar ch another sheet to this	e filing together, bo form. On the top of	oth are ed any addi	ually re tional pa	sponsible fo ages, write y	or supplying correct your name and case
Par 1.	t 1: Desci	ribe Your House	∌hold						
	■ No. Go to	line 2.							
			in a separ	ate household?					
	□ N □ Y		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.		
2.	Do you hav	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		De ag	pendent's e	Does dependent live with you?
	Do not state dependents				Son		13	3	□ No ■ Yes □ No
					Son		14	ļ	■ Yes
									□ No □ Yes
									☐ Yes
									☐ Yes
3.	expenses o	penses include f people other t d your depende	han 🗖	No Yes					
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your exp	enses
4.	The rental of	or home owners	ship exper	ses for your residence.	nclude first mortgage	=			
		nd any rent for th				4.	\$		565.00
	If not include	led in line 4:							
	4a. Real	estate taxes				4a.	\$		0.00
	•	rty, homeowner's				4b.			75.00
			•	upkeep expenses		4c.	· —		25.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. 5.	·		0.00

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Debtor	r 1 Kanica Chantey Le Mair Hudson	Cas	se num	ber (if known)	24-13634
6. U	Itilities:				
-	a. Electricity, heat, natural gas		6a.	\$	300.00
61	b. Water, sewer, garbage collection		6b.	\$	59.00
6	c. Telephone, cell phone, Internet, satellite, and	cable services	6c.	\$	350.00
60	d. Other. Specify: Ring Security Camera		6d.	\$	15.00
7. F	ood and housekeeping supplies		- 7.	\$	1,050.00
	childcare and children's education costs		8.	\$	75.00
). C	Clothing, laundry, and dry cleaning		9.	\$	187.00
	Personal care products and services		10.	\$	80.00
	ledical and dental expenses		11.	\$	100.00
	ransportation. Include gas, maintenance, bus or to	ain fare		<u> </u>	
	o not include car payments.	dirridio.	12.	\$	250.00
	Intertainment, clubs, recreation, newspapers, m	agazines, and books	13.	\$	75.00
	haritable contributions and religious donations	_	14.	\$	250.00
	nsurance.				
	o not include insurance deducted from your pay or	included in lines 4 or 20.			
	5a. Life insurance		15a.	\$	0.00
1	5b. Health insurance		15b.	\$	0.00
1	5c. Vehicle insurance		15c.	\$	160.00
	5d. Other insurance. Specify:		15d.	·	0.00
	faxes. Do not include taxes deducted from your pay	or included in lines 4 or 20	- 100.	–	0.00
	specify: Vehicle Tag & Registration	of included in lines 4 of 20.	16.	\$	50.00
	nstallment or lease payments:				
	7a. Car payments for Vehicle 1		17a.	·	0.00
	7b. Car payments for Vehicle 2		17b.	•	0.00
	7c. Other. Specify: Vehicle Payment [Grand:	mother's Name Only]	17c.	·	421.74
	7d. Other. Specify:		17d.	\$	0.00
	our payments of alimony, maintenance, and suleducted from your pay on line 5, Schedule I, Yo		18.	\$	0.00
	Other payments you make to support others who	do not live with you.		\$	0.00
	pecify:		19.		
	other real property expenses not included in line	es 4 or 5 of this form or on <i>Schedul</i>			
	0a. Mortgages on other property		20a.	·	0.00
	0b. Real estate taxes		20b.		0.00
	Oc. Property, homeowner's, or renter's insurance		20c.	\$	0.00
20	Od. Maintenance, repair, and upkeep expenses		20d.	\$	0.00
20	0e. Homeowner's association or condominium du	es	20e.	\$	0.00
1. O	Other: Specify: Pest Control		21.	+\$	50.00
2. C	Calculate your monthly expenses				
2	2a. Add lines 4 through 21.			\$	4,137.74
2	2b. Copy line 22 (monthly expenses for Debtor 2), i	f any, from Official Form 106J-2		\$	
2	2c. Add line 22a and 22b. The result is your month	ly expenses.		\$	4,137.74
	•	- •		· ———	-,
	Calculate your monthly net income.	from Schodula I	220	¢	4 272 02
	3a. Copy line 12 (your combined monthly income)		23a.	· -	4,273.62
2	3b. Copy your monthly expenses from line 22c ab	ove.	23b.	- \$	4,137.74
23	 Subtract your monthly expenses from your monthly net income. 	onthly income.	23c.	\$	135.88
Fo m	Oo you expect an increase or decrease in your exor example, do you expect to finish paying for your car loan additional to the terms of your mortgage? No.				ease or decrease because of a
	Yes. Explain here:				
	■ 165. Explain flote.				

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Fill in this inform	mation to identify your	case:			
Debtor 1	Kanica Chantey Le	Mair Hudson	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF MISSISSIPPI		
Case number	24-13634				☐ Check if this is an amended filing
Official Forr Declarat		n Individual	Debtor's S	Schedules	12/15
You must file thi obtaining money years, or both. 1	s form whenever you fi	connection with a bankı	or amended schedu	ıles. Making a false state	ement, concealing property, or 00, or imprisonment for up to 20
Did you pa	y or agree to pay some	one who is NOT an attorn	ey to help you fill o	ut bankruptcy forms?	
■ No					
☐ Yes. N	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	lty of perjury, I declare e true and correct.	that I have read the sumn	nary and schedules	filed with this declaration	on and
X /s/ Kan	ica Chantey Le Mair H	udson	X		
Kanica	Chantey Le Mair Hud re of Debtor 1		Signature	e of Debtor 2	

Date November 21, 2024

Date

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E-214	in this into	ation to identify							
		ation to identify you							
Der	otor 1	Kanica Chantey I	Le Mair Hudson Middle Name	Last Name					
	otor 2								
(Spo	ouse if, filing)	First Name	Middle Name	Last Name					
Uni	ted States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF MISSISSIPPI					
Cas	se number 2	4-13634							
(if kn	nown)				_	heck if this is an mended filing			
O٤	ficial Fam	um 107							
	ficial For atement	-	Affairs for Individ	duals Filing for B	ankruptcy	04/22			
info num	rmation. If monber (if known	ore space is needed,). Answer every que	attach a separate sheet to	this form. On the top of any	equally responsible for sup				
1.		current marital statu		Lived Belore					
	☐ Married ■ Not marr	ied							
2.			lived anywhere other than	where you live now?					
	_		•	•					
	NoYes. List all of the places you lived in the last 3 years. Do not include where you live now.								
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there			
3. state					ity property state or territory co, Texas, Washington and W				
	■ No								
	_	ke sure you fill out Scl	hedule H: Your Codebtors (Of	fficial Form 106H).					
_									
Par	t 2 Explain	the Sources of You	r Income						
4.	Fill in the total	amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part-		ndar years?			
	□ No								
	_	in the details.							
			Debtor 1		Debtor 2				
			Sources of income	Gross income	Sources of income	Gross income			
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)			
		of current year until I for bankruptcy:	■ Wages, commissions, bonuses, tips	\$62,078.09	☐ Wages, commissions, bonuses, tips				
			☐ Operating a business		☐ Operating a business				

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Debtor 1 Kanica Chantey Le Mair Hudson Case number (if known) 24-13634

				Debtor 1			Debtor 2		
				Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
	r last caler nuary 1 to	ndar year: December	31, 2023)	■ Wages, commissions, bonuses, tips		\$67,138.00	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business			Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips		\$68,319.00	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business			Operating a	business	
	and other winnings. List each	public bene If you are fil	fit payments; ing a joint cas he gross inco	er that income is taxable. Epensions; rental income; in e and you have income that the from each source sepa	terest; di at you re	ividends; money colle ceived together, list it	cted from lawsuits; only once under D	royalties; and ebtor 1.	
				Debtor 1			Debtor 2		
				Sources of income Describe below.	eac (be	oss income from ch source fore deductions and clusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pai	rt 3: Lis	t Certain Pa	yments You	Made Before You Filed for	or Bankr	uptcy			
6.	□ No.	Neither De individual During the No. Yes * Subject	90 days before Go to line 7 List below expaid that cruton adjustment or Debtor 2 or 90 days before Go to line 7 List below expaid that cruton adjustment or Debtor 2 or 90 days before Go to line 7 List below expanding pay	each creditor to whom you peditor. Do not include payments to an attorney for on 4/01/25 and every 3 year both have primarily contre you filed for bankruptcy, and creditor to whom you penents for domestic support	did you and a too an	pay any creditor a tot all of \$7,575* or more domestic support oblinkruptcy case. that for cases filed or lebts. pay any creditor a tot all of \$600 or more ar	al of \$7,575* or more particular in one or more particular as claim or after the date of all of \$600 or more?	ore? yments and the control of adjustment. you paid that	ne total amount you nd alimony. Also, do
			attorney for	this bankruptcy case.	J			·	, ,
	Creditor's Name and Address			Dates of payr	nent	Total amount paid	Amount you still owe	Was this p	payment for

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Debtor 1 Kanica Chantey Le Mair Hudson Case number (if known) 24-13634

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	erships of which you	ou are a general p iny managing age	artner; corporations nt, including one fo					
	☐ Yes. List all payments to an insider.										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi	s payment					
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No										
	☐ Yes. List all payments to an insider										
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for thi						
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.										
	Case title Case number	Nature of the case	Court or agency		Status of the o	case					
	Credit Acceptance Corporation vs. Kanica Myles Civil Action #: 2018-0241-COCI	Civil	Circuit Court of County P.O. Box 1953 Greenwood, MS		☐ Pending ☐ On appeal ☐ Concluded Judgment						
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details belov No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address	Describe the Property		oreclosed, garni		eized, or levied? Value of the property					
Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.											
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was n	Amount					
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at ■ No □ Yes		rty in the possessi	ion of an assigne	ee for the benefit	of creditors, a					

page 3

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Debtor 1 Kanica Chantey Le Mair Hudson Case number (if known) 24-13634

Par	t 5: List Certain Gifts and Contributions	S			
13.	Within 2 years before you filed for bankru ■ No □ Yes. Fill in the details for each gift.	ıptcy,	did you give any gifts with a total value of more th	nan \$600 per person	?
	Gifts with a total value of more than \$600 per person)	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankru No Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	within 1 year before you filed for bankrup or gambling? ■ No □ Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	ft, fire, other disaster,
	how the loss occurred	Include	ibe any insurance coverage for the loss ethe amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	repari	id you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you
	□ No □				
	Yes. Fill in the details.Person Who Was PaidAddress		Description and value of any property transferred	Date payment or transfer was	Amount of payment
	Email or website address Person Who Made the Payment, if Not Yo	ou		made	
	Abacus Credit Counseling 15760 Ventura Boulevard Suite 700 Encino, CA 91436 www.abacuscc.org		Pre-Filing Credit Counseling Course	November 15, 2024	\$25.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your cred Do not include any payment or transfer that	itors o		or transfer any prope	rty to anyone who
	■ No				
	Yes. Fill in the details. Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address		transferred	or transfer was	payment

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18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.										
	Person Who Received Transfer Address Person's relationship to you	Description and va property transferre		Describe any payments repaid in excha	ceived or debts	Date transfer was made					
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote No Yes. Fill in the details.	cy, did you transfer any action devices.)	property to a se	elf-settled trust	or similar device o	f which you are a					
	Name of trust	Description and va	alue of the prope	rty transferred		Date Transfer was made					
Par	tt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Stora	age Units							
20.	 Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. 										
		ast 4 digits of account number	Type of account instrument		•	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ar before you filed for	bankruptcy, any	safe deposit bo	ox or other deposit	ory for securities,					
	■ No										
	Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		escribe the cor	ntents	Do you still have it?					
22.	Have you stored property in a storage unit or No Yes. Fill in the details.	place other than your	home within 1 ye	ar before you f	iled for bankruptcy	7?					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)	-	escribe the cor	ntents	Do you still have it?					
Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in for someone. No Yes. Fill in the details.											
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, St Code)		escribe the pro	pperty	Value					
Par	rt 10: Give Details About Environmental Infor	,									

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.										
	Site	means any location, facility, or propert	ty as	defined under any environmental I	law,	whether you now own, operate, o	or utilize it or used				
		wn, operate, or utilize it, including disp				oto bozavdenio substance tavie s	batanaa				
		ardous material means anything an env ardous material, pollutant, contaminant			was	ste, nazardous substance, toxic s	substance,				
Rep	ort a	II notices, releases, and proceedings th	hat yo	ou know about, regardless of when	the	y occurred.					
24.	Has	any governmental unit notified you tha	at you	ı may be liable or potentially liable	und	ler or in violation of an environme	ental law?				
		No									
		Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Hav	e you notified any governmental unit of	f any	release of hazardous material?							
		No									
		Yes. Fill in the details.									
		me of site		Governmental unit		Environmental law, if you	Date of notice				
	Ad	dress (Number, Street, City, State and ZIP Code)		Address (Number, Street, City, State and ZIP Code)	d	know it					
26.	Hav	you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.									
	_	Ma									
		No Yes. Fill in the details.									
	Cas	se Title		Court or agency	Nat	ture of the case	Status of the				
	Cas	se Number		Name Address (Number, Street, City, State and ZIP Code)			case				
Par	t 11:	Give Details About Your Business or	Con	nections to Any Business							
27.	With	hin 4 years before you filed for bankrup	otcy, c	did you own a business or have an	y of	the following connections to any	business?				
		☐ A sole proprietor or self-employed i	in a t	rade, profession, or other activity,	eith	er full-time or part-time					
		☐ A member of a limited liability comp	pany	(LLC) or limited liability partnershi	ip (L	LP)					
		☐ A partner in a partnership									
		☐ An officer, director, or managing ex	xecut	ive of a corporation							
		☐ An owner of at least 5% of the votin	ng or	equity securities of a corporation							
	No. None of the above applies. Go to Part 12.										
		Yes. Check all that apply above and fil	ll in th	ne details below for each business	S.						
		siness Name	Des	scribe the nature of the business		Employer Identification number					
		dress mber, Street, City, State and ZIP Code)	Naı	me of accountant or bookkeeper		Do not include Social Security	number or ITIN.				
						Dates business existed					
28.		hin 2 years before you filed for bankrup itutions, creditors, or other parties.	otcy, c	lid you give a financial statement t	to an	nyone about your business? Inclu	ıde all financial				
		No									
		Yes. Fill in the details below.									
	Na	me dress	Dat	te Issued							
		mber, Street, City, State and ZIP Code)									

Part 12: Sign Below

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.

18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Kanica Chantey Le Mair Hudson
Kanica Chantey Le Mair Hudson
Signature of Debtor 2

Signature of Debtor 1

Date November 21, 2024

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

No
Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
Yes. Name of Person

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Mississippi

In re	Kanica Chantey Le Mair Hudson		Case No	. 24-13634
		Debtor(s)	Chapter	13
	DISCLOSURE OF COMPENSA	ATION OF ATTO	RNEY FOR I	DEBTOR(S)
(Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), leading to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or	the petition in bankruptcy	, or agreed to be pa	id to me, for services rendered or to
	For legal services, I have agreed to accept		\$	4,000.00
	Prior to the filing of this statement I have received			0.00
	Balance Due			4,000.00
2.	\$0.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compensa	ation with any other person	unless they are me	mbers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names of			
6.	In return for the above-disclosed fee, I have agreed to render	r legal service for all aspec	ts of the bankruptcy	case, including:
1	a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemer c. Representation of the debtor at the meeting of creditors at the Representation of the debtor in adversary proceedings and c. [Other provisions as needed]	nt of affairs and plan which nd confirmation hearing, a	n may be required; nd any adjourned h	
7.	By agreement with the debtor(s), the above-disclosed fee doe	es not include the following	g service:	
	$\overline{\mathbf{C}}$	ERTIFICATION		
	I certify that the foregoing is a complete statement of any agrankruptcy proceeding.	reement or arrangement for	payment to me for	representation of the debtor(s) in
N	ovember 21, 2024	/s/ William C. Cun	ningham	
	ate	William C. Cunnin	gham 7964	
		Signature of Attorne William C. Cunnin		
		P.O. Box 624	gnam	
		817 2nd Avenue N	North	
		Columbus, MS 39		
		662-329-2455 Fawccsinc@gmail.co		
		Name of law firm	лн -	